

02 FC:231

Filing Fee Calculation

CLAIMS AS FILED				
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	10	0	\$9.00	\$ 0.00
Independent Claims	3	0	\$39.00	\$ 0.00
Multiple Dependent Claim Fee (if applicable)				\$ 0.00
Assignment Recording Fee (if applicable)				\$ 0.00
Basic Filing Fee				\$ 380.00
Total Filing Fee				\$ 380.00

Please charge \$ _____ to Deposit Account No. _____ pursuant to 37 CFR § 1.25.

At any time during the pendency of this application, the Commissioner is hereby authorized to charge any fees required or credit any overpayment to this Deposit Account. A duplicate copy of this sheet is enclosed for fee processing against this Deposit Account 500482.

Respectfully submitted,

By: _____

Irene H. Fernandez
IRENE H. FERNANDEZ
Attorney of Record
Reg. No. 34,625

Date: 2 Sep 1999

Correspondence Address:

IRENE H. FERNANDEZ, ESQ.
FERNANDEZ & ASSOCIATES, LLP
1047 EL CAMINO REAL, SUITE 201
MENLO PARK, CA 94025

Phone: (650) 325-4999
Fax: (650) 325-1203
Email: irene@iploft.com

I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to:

Assistant Commissioner for Patents
Box CPA
Washington, D.C. 20231

By: _____

Irene H. Fernandez
Typed Name: IRENE H. FERNANDEZ
Express Mail Label No.: EJ737785195US

Date of Deposit: 2 SEP 1999